Rev. 02/2013



## State of Louisiana

Department of the Treasury
Unclaimed Property Division
P.O. Box 91010
Baton Rouge, LA 70821-9010
(225) 219-9400



## LOUISIANA REPORT OF UNCLAIMED PROPERTY VERIFICATION

Report Year:			Period Covered:	to
If the due date fall	s on a weekend c		e November 1. he next business day and becomes o	delinquent on the first day thereafter.
Holder Account Number				<u> </u>
(If Known) Holder Name:				
Address 1:				
Address 2:				
City, State, Zip:				
Contact Person:				
Telephone Number:			Fax Numbe	r:
Email Address:				
Federal ID Number:				
State of Incorporation:			Date of Incorporation	n:
Primary Business Activity:				
Did you file a report of Unclaimed Property last year?		VEC	) NO	
If NO, please explain:		YES	J NO L	
Previous Previous City, S  Please mark one:	Total Amou	YOUR REMITTANCE MUStanual Report (Due November ant Due From Last Page: Interest: Penalty: Total Remittance: nber of Shares of Stock:	ST ACCOMPANY THIS REPORT  Supplemental/  \$ \$ \$ \$	Additional Report
\$ reprovisions of La. R.S.  I further declare the nature of all proper that this report accounterest or is not in	egarding to t S. 9:151-181 a at this docum erties, remitte curately reflec terest bearing	, hereby declarentation contain a full, the property presumed as of entation contains completed with this documentation to whether each unit of regular to the contains and acknowledges. I understand and acknowledges.	erue, and complete report contains abandoned, remitted with and accurate information on contained therein. Specification by the contained therein and accurate in the contained	that to the best of my knowledge onsisting of page(s) totaling this documentation, under the pertaining to the interest-bearing fically, I acknowledge and declare the attached documentation, bears that a remitted unit of property as to bearing.
Signature of Official Title Date				